

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 38
BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

| | | |
|---|--|--|
| 1. NAME OF COMMITTEE (in full) Chris Dodd For President Inc | | 2. IDENTIFICATION NUMBER C00431379 |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported PO Box 270701 | | |
| CITY, STATE, and ZIP CODE West Hartford CT 06127 | | 3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General |

4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)

☐ April 15 Quarterly Report☐ July 15 Quarterly Report☒ October 15 Quarterly Report☐ January 31 Year End Report

Monthly Report Due On:

☐ February 20☐ March 20☐ April 20☐ May 20☐ June 20☐ July 20☐ August 20☐ September 20☐ October 20☐ November 20☐ December 20☐ January 31☐ Twelfth day report preceding

(Type of Election)

election on _____ in the State of _____

☐ Thirtieth day report following the General Election on

on _____

IS THIS REPORT AN AMENDMENT ☒ YES ☐ NO

| | | | |
|---|--|--------------------|-----------------------|
| 5. COVERING PERIOD | | FROM 07/01/2010 | THROUGH 09/30/2010 |
| SUMMARY | 6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD | 51154.11 | |
| | 7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2) | 17344.49 | |
| | 8. SUBTOTAL (Lines 6 and 7) | 68498.60 | |
| | 9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) | 47277.54 | |
| | 10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8) | 21221.06 | |
| | 11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 0.00 | |
| | 12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P) | 98452.95 | |
| | 13. EXPENDITURES SUBJECT TO LIMITATION | 15648751.57 | |
| NET ELECTION CYCLE- TO-DATE CONTRIBUTIONS AND EXPENDITURES | 14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) | 9605969.95 | |
| | 15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2) | 15653991.57 | |

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer
Kathryn DamatoDate
01/31/2011

Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
All previous versions of FEC FORM 3P are obsolete and should no longer be used.For further information contact: Federal Election Commission
999 E Street, N.W.
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 3P**
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full)

Chris Dodd For President Inc

Report Covering the Period

From: 07/01/2010

To: 09/30/2010

| I. RECEIPTS | | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------|---------------------------------------|--|
| 16. FEDERAL FUNDS (Itemize on Schedule A-P) | ..... | 0.00 | 1961741.71 |
| 17. CONTRIBUTIONS (other than loans) FROM : | | | |
| (a) Individuals/Persons Other Than Political Committees | ..... | 9800.00 | 10200571.95 |
| (b) Political Party Committees | ..... | 0.00 | 100.00 |
| (c) Other Political Committees | ..... | 7500.00 | 768198.30 |
| (d) The Candidate | ..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d)) | | 17300.00 | 10968870.25 |
| 18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | ..... | 0.00 | 4860755.00 |
| 19. LOANS RECEIVED: | | | |
| (a) Loans Received From or Guaranteed by Candidate | ..... | 0.00 | 0.00 |
| (b) Other Loans | ..... | 0.00 | 1302811.25 |
| (c) TOTAL LOANS (Add 19(a) and 19(b)) | ..... | 0.00 | 1302811.25 |
| 20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) : | | | |
| (a) Operating | ..... | 0.00 | 126708.81 |
| (b) Fundraising | ..... | 0.00 | 5240.00 |
| (c) Legal and Accounting | ..... | 0.00 | 0.00 |
| (d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c)) | | 0.00 | 131948.81 |
| 21. OTHER RECEIPTS (Dividend, Interest, etc.) | ..... | 44.49 | -304483.02 |
| 22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21) | ..... | 17344.49 | 18921644.00 |
| II. DISBURSEMENTS | | | |
| 23. OPERATING EXPENDITURES | ..... | 47277.54 | 15780700.38 |
| 24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | ..... | 0.00 | 440110.00 |
| 25. FUNDRAISING DISBURSEMENTS | ..... | 0.00 | 0.00 |
| 26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS | ..... | 0.00 | 0.00 |
| 27. LOAN REPAYMENTS MADE : | | | |
| (a) Repayment of Loans made or Guaranteed by Candidate | ..... | 0.00 | 0.00 |
| (b) Other Repayments | ..... | 0.00 | 1302811.25 |
| (c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)) | ..... | 0.00 | 1302811.25 |
| 28. REFUNDS OF CONTRIBUTIONS TO : | | | |
| (a) Individuals/Persons Other Than Political Committees | ..... | 0.00 | 1190642.00 |
| (b) Political Party Committees | ..... | 0.00 | 0.00 |
| (c) Other Political Committees | ..... | 0.00 | 172258.30 |
| (d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c)) | ..... | 0.00 | 1362900.30 |
| 29. OTHER DISBURSEMENTS | ..... | 0.00 | 11000.00 |
| 30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) | ..... | 47277.54 | 18897521.93 |
| III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.) | | | |
| 31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) | ..... | 0.00 | |

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)

3 / 38

1. NAME OF COMMITTEE (in full)

Chris Dodd For President Inc

ADDRESS (number and street)

PO Box 270701

CITY, STATE, and ZIP CODE

West Hartford

CT

06127

2. IDENTIFICATION NUMBER

C00431379

ALLOCATION BY STATE

| STATE | ALLOCATION THIS PERIOD | TOTAL ALLOCATION TO DATE | STATE | ALLOCATION THIS PERIOD | TOTAL ALLOCATION TO DATE |
|----------------------|---------------------------|--------------------------------|----------------|---------------------------|--------------------------------|
| Alabama | 0.00 | 0.00 | Nebraska | 0.00 | 0.00 |
| Alaska | 0.00 | 0.00 | Nevada | 0.00 | 31412.23 |
| Arizona | 0.00 | 0.00 | New Hampshire | 0.00 | 694906.41 |
| Arkansas | 0.00 | 0.00 | New Jersey | 0.00 | 0.00 |
| California | 0.00 | 0.00 | New Mexico | 0.00 | 0.00 |
| Colorado | 0.00 | 0.00 | New York | 0.00 | 0.00 |
| Connecticut | 0.00 | 0.00 | North Carolina | 0.00 | 0.00 |
| Delaware | 0.00 | 0.00 | North Dakota | 0.00 | 0.00 |
| District of Columbia | 0.00 | 41.21 | Ohio | 0.00 | 0.00 |
| Florida | 0.00 | 0.00 | Oklahoma | 0.00 | 0.00 |
| Georgia | 0.00 | 0.00 | Oregon | 0.00 | 0.00 |
| Hawaii | 0.00 | 0.00 | Pennsylvania | 0.00 | 0.00 |
| Idaho | 0.00 | 0.00 | Rhode Island | 0.00 | 0.00 |
| Illinois | 0.00 | 0.00 | South Carolina | 0.00 | 533.78 |
| Indiana | 0.00 | 0.00 | South Dakota | 0.00 | 0.00 |
| Iowa | 0.00 | 2510687.16 | Tennessee | 0.00 | 0.00 |
| Kansas | 0.00 | 0.00 | Texas | 0.00 | 0.00 |
| Kentucky | 0.00 | 0.00 | Utah | 0.00 | 0.00 |
| Louisiana | 0.00 | 0.00 | Vermont | 0.00 | 0.00 |
| Maine | 0.00 | 0.00 | Virginia | 0.00 | 0.00 |
| Maryland | 0.00 | 68.00 | Washington | 0.00 | 0.00 |
| Massachussetts | 0.00 | 0.00 | West Virginia | 0.00 | 0.00 |
| Michigan | 0.00 | 0.00 | Wisconsin | 0.00 | 0.00 |
| Minnesota | 0.00 | 0.00 | Wyoming | 0.00 | 0.00 |
| Mississippi | 0.00 | 0.00 | Puerto Rico | 0.00 | 0.00 |
| Missouri | 0.00 | 0.00 | Guam | 0.00 | 0.00 |
| Montana | 0.00 | 0.00 | Virgin Islands | 0.00 | 0.00 |
| | | | TOTALS | 0.00 | 3237648.79 |

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 4 / 38

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Act Blue

Mailing Address

P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 1 0

Amount of Each Receipt this Period

4300.00

[MEMO ITEM]

Transaction ID: A56165792B3C6498AB8A

B.

Full Name (Last, First, Middle Initial)

John Brademas

Mailing Address

King Juan Carols 1 of Spain

Center Washington Sq.

City

New York

State

NY

Zip Code

10012

FEC ID number of contributing
federal political committee.

Name of Employer
NYU

Occupation

President Emeritus

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: A710C176C98DE4BFE8B5

C.

Full Name (Last, First, Middle Initial)

Penelope D. Foley

Mailing Address

175 N Canyon View Drive

City

Los Angeles

State

CA

Zip Code

90049-2721

FEC ID number of contributing
federal political committee.

Name of Employer
TCW Worldwide

Occupation

Portfolio Manager

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 2 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: A320A42EA104348D885A

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 / 38

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Samir A. Gandhi

Mailing Address

7 Chalford Lane

City

Scarsdale

State

NY

Zip Code

10583-3533

FEC ID number of contributing
federal political committee.

Name of Employer
Sidley Austin LLP

Occupation
Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: A8A94736AE1574F6CAAD

B.

Full Name (Last, First, Middle Initial)

Thomas Moran

Mailing Address

320 Park Avenue

City

New York

State

NY

Zip Code

10022-6815

FEC ID number of contributing
federal political committee.

Name of Employer
Mutual of America

Occupation
Insurance

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 1 0

Amount of Each Receipt this Period

2300.00

Transaction ID: A7493896D6FA046B495A

C.

Full Name (Last, First, Middle Initial)

Nicholas B Paumgarten

Mailing Address

411 Centre Island Road

City

Oyster Bay

State

NY

Zip Code

11771-5011

FEC ID number of contributing
federal political committee.

Name of Employer
Corsair Investments

Occupation
Finance

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 2 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: A090EAC5ADF454CFFAA7

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 38

(check only one)

| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Robert D Petty

Mailing Address

222 Park Avenue South

10E

City

New York

State

NY

Zip Code

10003-1504

FEC ID number of contributing
federal political committee.

Name of Employer

Clearwater Capital

Occupation

Private Equity Manager

Receipt For: 2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: A9E3EBADF7EC1473F8D6

B.

Full Name (Last, First, Middle Initial)

Daniel Rose

Mailing Address

200 Madison Avenue

City

New York

State

NY

Zip Code

10016-3903

FEC ID number of contributing
federal political committee.

Name of Employer

Rose Associates

Occupation

Chairman

Receipt For: 2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: AEDDAE46C2A7148A79DF

C.

Full Name (Last, First, Middle Initial)

Judith Thoyer

Mailing Address

1115 Fifth Avenue

Apt. 3B

City

New York

State

NY

Zip Code

10128-0100

FEC ID number of contributing
federal political committee.

Name of Employer

Paul Weiss Rifkind

Occupation

Attorney

Receipt For: 2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 1 2 / 2 0 1 0

Amount of Each Receipt this Period

500.00

Transaction ID: AE925C0BFC2BF4ECF876

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | | |
|------------------------------|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input checked="" type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Enzo Viscusi

Mailing Address

139 E 63rd Street

City

New York

State

NY

Zip Code

10065-7440

FEC ID number of contributing
federal political committee.

Name of Employer
ENI Petroleum

Occupation
Chairman

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 1 0

Amount of Each Receipt this Period

1000.00

Transaction ID: A32B10F0DA26F4066A30

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

9800.00

Schedule A-P

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 38

(check only one)

| | | | | | |
|------------------------------|------------------------------|------------------------------|---|------------------------------|-----------------------------|
| <input type="checkbox"/> 16 | <input type="checkbox"/> 17a | <input type="checkbox"/> 17b | <input checked="" type="checkbox"/> 17c | <input type="checkbox"/> 17d | <input type="checkbox"/> 18 |
| <input type="checkbox"/> 19a | <input type="checkbox"/> 19b | <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Stephens Federal PAC

Mailing Address

111 Center Street

City

Little Rock

State

AR

Zip Code

72201

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 0 | 5 | | 2 | 0 | 1 | 0 |

Amount of Each Receipt this Period

5000.00

Transaction ID: A9864D95F2BD44885A70

B.

Full Name (Last, First, Middle Initial)

To Organize a Majority PAC

Mailing Address

PO Box 752

City

Des Moines

State

IA

Zip Code

50303

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | | 2 | 6 | | 2 | 0 | 1 | 0 |

Amount of Each Receipt this Period

2500.00

Transaction ID: AFA1A699F4C9246CA8F1

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

7500.00

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 38

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) Act Blue Mailing Address P.O. Box 382110 | Transaction ID: B8A7FB6F50B3242849A7 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 1 0</div> </div> |
| City State Zip Code Cambridge MA 02238 Purpose of Disbursement Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | Amount of Each Disbursement this Period <div>169.85</div> |
| B. Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 126 Marrow Road City State Zip Code Auburn ME 04210 Purpose of Disbursement Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | Transaction ID: BBCFC6F7CB3774D96AEB Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>114.20</div> |
| C. Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 126 Marrow Road City State Zip Code Auburn ME 04210 Purpose of Disbursement Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | Transaction ID: B3A869554DB4F4C5794D Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div> Amount of Each Disbursement this Period <div>114.20</div> |

SUBTOTAL of Disbursements This Page (optional)

398.25

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Advantage Payroll Services | Transaction ID: B54293F90D80C49AF820 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 126 Marrow Road | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 1 | 5 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 1 | 5 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Auburn State ME Zip Code 04210 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Processing Fee | <table border="1"> <tr> <td colspan="10">114.20</td> </tr> </table> | 114.20 | | | | | | | | | | | | | | | | | | | |
| 114.20 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) American Express | Transaction ID: B8EB1C0F9EE5E47C0A21 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 981535 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 0 | 6 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 0 | 6 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City El Paso State TX Zip Code 79998-1535 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fee | <table border="1"> <tr> <td colspan="10">5.95</td> </tr> </table> | 5.95 | | | | | | | | | | | | | | | | | | | |
| 5.95 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) American Express | Transaction ID: B1F03CD9D70BF4BB18C3 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 981535 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 3 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 3 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City El Paso State TX Zip Code 79998-1535 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fee | <table border="1"> <tr> <td colspan="10">7.95</td> </tr> </table> | 7.95 | | | | | | | | | | | | | | | | | | | |
| 7.95 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

128.10

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 38

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) American Express | Transaction ID: B720E18AED4A34550ADA Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address PO Box 981535 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 7 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 7 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City El Paso State TX Zip Code 79998-1535 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fee | <table border="1"> <tr> <td colspan="10">7.95</td> </tr> </table> | 7.95 | | | | | | | | | | | | | | | | | | | |
| 7.95 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Aristotle Publishing | Transaction ID: BCC7A2AF2810A432EA39 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 205 Pennsylvania Ave | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 2 | 7 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 2 | 7 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20003 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Software | <table border="1"> <tr> <td colspan="10">6000.00</td> </tr> </table> | 6000.00 | | | | | | | | | | | | | | | | | | | |
| 6000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Aristotle Publishing | Transaction ID: B233C4BC5CDFE4DCC9AD Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 205 Pennsylvania Ave | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 3 | 0 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 3 | 0 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20003 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Subscription Fee | <table border="1"> <tr> <td colspan="10">4000.00</td> </tr> </table> | 4000.00 | | | | | | | | | | | | | | | | | | | |
| 4000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

10007.95

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|-------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Authorize.net | Transaction ID: B95DCB4AE06064A6D907 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 915 South 500 East, Ste. 200 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 0 | 2 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 0 | 2 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City American Fork State UT Zip Code 84003-3373 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fee Candidate Name | <table border="1"> <tr> <td>25.00</td> </tr> </table> | 25.00 | | | | | | | | | | | | | | | | | | | |
| 25.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Authorize.net | Transaction ID: B0D97AF91F22042A39B1 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 915 South 500 East, Ste. 200 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 0 | 3 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 0 | 3 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City American Fork State UT Zip Code 84003-3373 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fee Candidate Name | <table border="1"> <tr> <td>25.00</td> </tr> </table> | 25.00 | | | | | | | | | | | | | | | | | | | |
| 25.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Authorize.net | Transaction ID: B3944B2DC1F2D427AA3C Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 915 South 500 East, Ste. 200 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 2 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 2 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City American Fork State UT Zip Code 84003-3373 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Fee Candidate Name | <table border="1"> <tr> <td>25.00</td> </tr> </table> | 25.00 | | | | | | | | | | | | | | | | | | | |
| 25.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

75.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 830175
Acct Analysis

City Dallas State TX Zip Code 75283-0175

Purpose of Disbursement
Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: B983722A7B55A4F4AA38

Date of Disbursement

08 / 04 / 2010

Amount of Each Disbursement this Period

27.42

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address P.O. Box 830175
Acct Analysis

City Dallas State TX Zip Code 75283-0175

Purpose of Disbursement
Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BDF73648B354840AEB57

Date of Disbursement

09 / 08 / 2010

Amount of Each Disbursement this Period

33.47

C.

Full Name (Last, First, Middle Initial)

BankCard

Mailing Address

City State Zip Code

Purpose of Disbursement
Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: BB17BE3F5323142E9BE9

Date of Disbursement

07 / 06 / 2010

Amount of Each Disbursement this Period

79.95

SUBTOTAL of Disbursements This Page (optional)

140.84

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 38

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) BankCard Mailing Address City State Zip Code Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BDC52DE71D436429993E Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 1 0 Amount of Each Disbursement this Period 79.95 |
| B. Full Name (Last, First, Middle Initial) BankCard Mailing Address City State Zip Code Purpose of Disbursement Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BEEC41739BB804C0B812 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 1 0 Amount of Each Disbursement this Period 79.95 |
| C. Full Name (Last, First, Middle Initial) CT Dept Taxation Mailing Address 25 Sigourney St. City State Zip Code Hartford CT 06106 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B1C71B724DD9344F4A74 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 1 0 Amount of Each Disbursement this Period 10.38 |

SUBTOTAL of Disbursements This Page (optional) ►

170.28

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | | | | | | | | |
|--|--|-------------------|-------------------|----------------------------------|-------------------------------|----------------|--|--|--|
| A. Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> <table> <tr> <td>City Hartford</td> <td>State CT</td> <td>Zip Code 06106</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Taxes</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State: District: | City Hartford | State CT | Zip Code 06106 | Purpose of Disbursement Taxes | <div>Category/ Type</div> | Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BB205F6BC26734C7EB07 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 5 / 2 0 1 0</div> </div> <hr/> Amount of Each Disbursement this Period <div>5.63</div> |
| City Hartford | State CT | Zip Code 06106 | | | | | | | |
| Purpose of Disbursement Taxes | <div>Category/ Type</div> | | | | | | | | |
| Candidate Name | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) CT Dept Taxation <hr/> Mailing Address 25 Sigourney St. <hr/> <table> <tr> <td>City Hartford</td> <td>State CT</td> <td>Zip Code 06106</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Taxes</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State: District: | City Hartford | State CT | Zip Code 06106 | Purpose of Disbursement Taxes | <div>Category/ Type</div> | Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: B5C299D8F3B754456A15 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div> <hr/> Amount of Each Disbursement this Period <div>5.63</div> |
| City Hartford | State CT | Zip Code 06106 | | | | | | | |
| Purpose of Disbursement Taxes | <div>Category/ Type</div> | | | | | | | | |
| Candidate Name | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) DC Dept Taxation <hr/> Mailing Address P.O. Box 470 <hr/> <table> <tr> <td>City Washington</td> <td>State DC</td> <td>Zip Code 20044</td> </tr> </table> <hr/> <table> <tr> <td>Purpose of Disbursement Taxes</td> <td rowspan="2"><div>Category/ Type</div></td> </tr> <tr> <td>Candidate Name</td> </tr> </table> <hr/> <table> <tr> <td>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</td> <td>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</td> </tr> </table> <hr/> State: District: | City Washington | State DC | Zip Code 20044 | Purpose of Disbursement Taxes | <div>Category/ Type</div> | Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: BFBBF2BA147B0405E884 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div> <hr/> Amount of Each Disbursement this Period <div>543.00</div> |
| City Washington | State DC | Zip Code 20044 | | | | | | | |
| Purpose of Disbursement Taxes | <div>Category/ Type</div> | | | | | | | | |
| Candidate Name | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional) ►

554.26

TOTAL This Period (last page this line number only) ►

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | |
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| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) DC Dept Taxation | Transaction ID: BD16F72E875BA41EA8FE Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 470 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 1 | 5 | | 2 | 0 | 1 | 0 |
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| City Washington State DC Zip Code 20044 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Taxes | <table border="1"> <tr> <td colspan="10">543.00</td> </tr> </table> | 543.00 | | | | | | | | | | | | | | | | | | | |
| 543.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) DC Dept Taxation | Transaction ID: B6E297450EB1741CFA32 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 470 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 1 | 5 | | 2 | 0 | 1 | 0 |
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| City Washington State DC Zip Code 20044 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Taxes | <table border="1"> <tr> <td colspan="10">543.00</td> </tr> </table> | 543.00 | | | | | | | | | | | | | | | | | | | |
| 543.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) IRS | Transaction ID: BEF9A456204214B8FBE5 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 8530 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 5 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 1 | 5 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Philadelphia State PA Zip Code 19162 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Taxes | <table border="1"> <tr> <td colspan="10">2584.65</td> </tr> </table> | 2584.65 | | | | | | | | | | | | | | | | | | | |
| 2584.65 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| State: District: | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

3670.65

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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| | | | | |
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| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) IRS | Transaction ID: B7FB452B7FF9D4522A74 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 8530 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 1 | 5 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 1 | 5 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Philadelphia State PA Zip Code 19162 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Taxes | <table border="1"> <tr> <td>2584.65</td> </tr> </table> | 2584.65 | | | | | | | | | | | | | | | | | | | |
| 2584.65 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) IRS | Transaction ID: B525D49B4D1F14D6FAE7 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address P.O. Box 8530 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td> <td>1</td><td>5</td><td></td> <td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 1 | 5 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 1 | 5 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Philadelphia State PA Zip Code 19162 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Taxes | <table border="1"> <tr> <td>2584.65</td> </tr> </table> | 2584.65 | | | | | | | | | | | | | | | | | | | |
| 2584.65 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Perkins Coie | Transaction ID: B87D15F406A354761980 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address Centralized Accouting Dept. 1201 Third Ave., 40th Floor | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td> <td>1</td><td>1</td><td></td> <td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 1 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 1 | 1 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Seattle State WA Zip Code 98101-3099 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Legal Services | <table border="1"> <tr> <td>5000.00</td> </tr> </table> | 5000.00 | | | | | | | | | | | | | | | | | | | |
| 5000.00 | | | | | | | | | | | | | | | | | | | | | |
| Candidate Name | Category/ Type | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

10169.30

TOTAL This Period (last page this line number only)

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| X | 23 | | 24 | | 25 | | 26 | | 27a |
| | 27b | | 28a | | 28b | | 28c | | 29 |

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

FEC Schedule B (Form 3P)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 38

| | | | | |
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| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

| | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| A. Full Name (Last, First, Middle Initial) Kathryn Damato | Transaction ID: B1F39D2F0FD794134936 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 10 Blackhawk Lane | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 8 | | 1 | 5 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 8 | | 1 | 5 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City West Hartford State CT Zip Code 06117-2903 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Salary Candidate Name Category/ Type | <table border="1"> <tr> <td colspan="10">1248.47</td> </tr> </table> | 1248.47 | | | | | | | | | | | | | | | | | | | |
| 1248.47 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | | | | | | | | | | | | | | | | | | | | |
| B. Full Name (Last, First, Middle Initial) Kathryn Damato | Transaction ID: BE6B18B1C18964668AE1 Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 10 Blackhawk Lane | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 1 | 5 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 1 | 5 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City West Hartford State CT Zip Code 06117-2903 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Salary Candidate Name Category/ Type | <table border="1"> <tr> <td colspan="10">1248.47</td> </tr> </table> | 1248.47 | | | | | | | | | | | | | | | | | | | |
| 1248.47 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | | | | | | | | | | | | | | | | | | | | |
| C. Full Name (Last, First, Middle Initial) Haroon Khan | Transaction ID: BAFBB025E2C5B4EB5B5F Date of Disbursement | | | | | | | | | | | | | | | | | | | | |
| Mailing Address 770 5th Street NW Apt. # 308 | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 1 | 5 | | 2 | 0 | 1 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 1 | 5 | | 2 | 0 | 1 | 0 | | | | | | | | | | | | |
| City Washington State DC Zip Code 20001-2649 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | | |
| Purpose of Disbursement Salary Candidate Name Category/ Type | <table border="1"> <tr> <td colspan="10">5845.00</td> </tr> </table> | 5845.00 | | | | | | | | | | | | | | | | | | | |
| 5845.00 | | | | | | | | | | | | | | | | | | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | | | | | | | | | | | | | | | | | | | | |

SUBTOTAL of Disbursements This Page (optional)

8341.94

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 38

| | | | | |
|--|------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 | <input type="checkbox"/> 27a |
| <input type="checkbox"/> 27b | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Chris Dodd For President Inc

A.

Full Name (Last, First, Middle Initial)

Haroon Khan

Mailing Address 770 5th Street NW
Apt. # 308

City Washington State DC Zip Code 20001-2649

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BB94D99E4DE5B45748FB

Date of Disbursement

08 / 15 / 2010

Amount of Each Disbursement this Period

5845.00

B.

Full Name (Last, First, Middle Initial)

Haroon Khan

Mailing Address 770 5th Street NW
Apt. # 308

City Washington State DC Zip Code 20001-2649

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: BF78DEB00306044A3994

Date of Disbursement

09 / 15 / 2010

Amount of Each Disbursement this Period

5845.00

SUBTOTAL of Disbursements This Page (optional)

11690.00

TOTAL This Period (last page this line number only)

47277.54

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 / 38

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
REMAX Results RealtyNature of Debt (Purpose):
Rent and Utilities

Mailing Address 202 1st NW

City State ZIP Code
Mason City IA 50401

Outstanding Balance Beginning This Period

1036.46

Transaction ID: D14F42980C9EF465D8A0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1036.46

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

669.82

Transaction ID: D6224518C358E4E34936

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

669.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
QwestNature of Debt (Purpose):
TelephoneMailing Address Business Services
PO Box 91154City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

657.85

Transaction ID: D160BB52601F3469FBFA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

657.85

1) **SUBTOTALS** This Period This Page (optional).....

2364.13

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

471.50

Transaction ID: DE70EBFB35F4E4F5BBA8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

471.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

58.58

Transaction ID: DC07FD8583E3F4BA58CA

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

58.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

418.15

Transaction ID: DA397374A80A8418D9FD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

418.15

1) **SUBTOTALS** This Period This Page (optional).....

948.23

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

575.42

Transaction ID: DA3182C7E844C4F039CE

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

575.42

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

431.46

Transaction ID: D703363A20B0E44A7A6C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

431.46

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

106.73

Transaction ID: DE2EA2BD913EF4C59A0F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.73

1) **SUBTOTALS** This Period This Page (optional).....

1113.61

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Qwest

Nature of Debt (Purpose):
Telephone

Mailing Address Business Services
PO Box 91154

City State ZIP Code
Seattle WA 98111

Outstanding Balance Beginning This Period

622.51

Transaction ID: DA75CCBF704CB4716B86

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

622.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Des Moines Theatrical Shop

Nature of Debt (Purpose):
Costume Rental

Mailing Address 145 5th Street

City State ZIP Code
West Des Moines IA 50265

Outstanding Balance Beginning This Period

106.00

Transaction ID: D7952AAF64B9C4F0997B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Cox Communications

Nature of Debt (Purpose):
Internet Services

Mailing Address PO Box 6059

City State ZIP Code
Cypress CA 90630

Outstanding Balance Beginning This Period

138.02

Transaction ID: DEAECEB41D358C496EAE8

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

138.02

1) **SUBTOTALS** This Period This Page (optional).....

866.53

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verham NewsNature of Debt (Purpose):
Rent

Mailing Address P.O. Box 706

City State ZIP Code
White Riv Jct VT 05001-0706

Outstanding Balance Beginning This Period

910.28

Transaction ID: DE2E3D979014F4B2194A

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

910.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
U.S. Express Inc.Nature of Debt (Purpose):
Courier Services

Mailing Address 3240 Hubbard Road

City State ZIP Code
Landover MD 20785

Outstanding Balance Beginning This Period

160.24

Transaction ID: D80871DA60A7642ADAA1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

160.24

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Old Town Family RestaurantNature of Debt (Purpose):
Food & Beverage

Mailing Address 2107 Camanche Avenue

City State ZIP Code
Clinton IA 52732-6036

Outstanding Balance Beginning This Period

130.00

Transaction ID: D8B59DA12044449C0AE9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

130.00

1) SUBTOTALS This Period This Page (optional).....

1200.52

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COVAD

Nature of Debt (Purpose):
Internet Services

Mailing Address Dept. 33408
PO BOX 39000

City State ZIP Code
San Francisco CA 94139

Outstanding Balance Beginning This Period

1535.76

Transaction ID: D5E78BD6138D849C8A7B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1535.76

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
COVAD

Nature of Debt (Purpose):
Internet Services

Mailing Address Dept. 33408
PO BOX 39000

City State ZIP Code
San Francisco CA 94139

Outstanding Balance Beginning This Period

1056.76

Transaction ID: D7FB209F7C488450BA73

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1056.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Home Front Communications

Nature of Debt (Purpose):
Video

Mailing Address 1121 14th Street NW

City State ZIP Code
Washington DC 20005-5641

Outstanding Balance Beginning This Period

6000.00

Transaction ID: D9C275736AC4E46B69DC

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6000.00

1) **SUBTOTALS** This Period This Page (optional).....

8592.52

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660720

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

22.28

Transaction ID: DF9E84213BC0C4FA4959

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.28

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Jim VanDusseldorp

Nature of Debt (Purpose):
Bus Servicing

Mailing Address 2406 15th Ave. N.

City State ZIP Code
Clear Lake IA 50428-2037

Outstanding Balance Beginning This Period

92.50

Transaction ID: DECE5259C4BB240ADB7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VFW Post 775

Nature of Debt (Purpose):
Space Rental

Mailing Address 702 West Main Street

City State ZIP Code
Ottumwa IA 52501-2226

Outstanding Balance Beginning This Period

150.00

Transaction ID: D9F4487EF4F6F4DB6923

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.00

1) **SUBTOTALS** This Period This Page (optional).....

264.78

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Kilkenney'sNature of Debt (Purpose):
Food & Beverage

Mailing Address 300 West 3rd Street

City State ZIP Code
Davenport IA 52801-1208

Outstanding Balance Beginning This Period

220.00

Transaction ID: DE9F171102B294984BCD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

220.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ComcastNature of Debt (Purpose):
Cable & Internet

Mailing Address PO Box 1577

City State ZIP Code
Newark NJ 07101

Outstanding Balance Beginning This Period

351.30

Transaction ID: D3A3A16E658A34B44B21

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

351.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

239.04

Transaction ID: DD0258CA80C884AB6960

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

239.04

1) SUBTOTALS This Period This Page (optional).....

810.34

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
KeyspanNature of Debt (Purpose):
Utilities

Mailing Address 52 Second Avenue

City State ZIP Code
Waltham MA 02451

Outstanding Balance Beginning This Period

1481.16

Transaction ID: DDFA00C779CF445C8AA6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1481.16

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MoreSound CompanyNature of Debt (Purpose):
Sound Equipment

Mailing Address 102 North Street

City State ZIP Code
Jaffrey NH 03452-5301

Outstanding Balance Beginning This Period

400.00

Transaction ID: D4310E2A2AC3D49AFB1C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ComcastNature of Debt (Purpose):
Cable Service

Mailing Address P.O. Box 3005

City State ZIP Code
Southeastern PA 19398-3005

Outstanding Balance Beginning This Period

197.56

Transaction ID: D1327435AF7974016BBD

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

197.56

1) **SUBTOTALS** This Period This Page (optional).....

2078.72

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Geoff Luxenberg

Nature of Debt (Purpose):
Reimbursement for gas &
signatures

Mailing Address 249A New State Road

City State ZIP Code
Manchester CT 06042-7959

Outstanding Balance Beginning This Period

107.00

Transaction ID: D8E19BDBD0BE84CDFB6C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WHO Newsradio 1040

Nature of Debt (Purpose):
Recording Services

Mailing Address 2141 Grand Avenue

City State ZIP Code
Des Moines IA 50312

Outstanding Balance Beginning This Period

400.00

Transaction ID: D5CA66406DA5143F7848

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Free Media, Inc.

Nature of Debt (Purpose):
Reimbursement for Phone
Expenses
Mailing Address 777 West End Avenue
#5C
City State ZIP Code
New York NY 10025

Outstanding Balance Beginning This Period

150.09

Transaction ID: D142C4EE26CC3459DA22

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

150.09

1) **SUBTOTALS** This Period This Page (optional).....

657.09

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
The TelegraphNature of Debt (Purpose):
Subscription

Mailing Address PO Box 1008

City State ZIP Code
Nashua NH 03061

Outstanding Balance Beginning This Period

20.81

Transaction ID: D1D76CBB4EBC7498F81D

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20.81

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Interstate Power and Light Co.Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 5007

City State ZIP Code
Dubuque IA 52004-5007

Outstanding Balance Beginning This Period

250.36

Transaction ID: DF8C3EA191F814F5C94C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

250.36

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Newman and Leventhal Caterers, Inc.Nature of Debt (Purpose):
Caterer

Mailing Address 45 West 81st Street

City State ZIP Code
New York NY 10024-6025

Outstanding Balance Beginning This Period

2136.07

Transaction ID: D2FDEA7A6FB3F461FA7F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2136.07

1) SUBTOTALS This Period This Page (optional).....

2407.24

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Embarq

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660068

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

1064.16

Transaction ID: DBF0B293CD60A40ED8E0

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1064.16

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Embarq

Nature of Debt (Purpose):
Telephone

Mailing Address PO Box 660068

City State ZIP Code
Dallas TX 75266

Outstanding Balance Beginning This Period

378.82

Transaction ID: DF4A4422265684FB29B9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

378.82

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

153.03

Transaction ID: D40B8D89E3ABE4545B3C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.03

1) **SUBTOTALS** This Period This Page (optional).....

1596.01

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

364.55

Transaction ID: DC3EE07A89ADF414596B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

364.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

561.93

Transaction ID: DA1C685B9BF4F4CD7A76

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

561.93

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Verizon

Nature of Debt (Purpose):
Monthly Phone Charges

Mailing Address 8808 Irvine Center Drive

City State ZIP Code
Irvine CA 92618-4201

Outstanding Balance Beginning This Period

660.55

Transaction ID: D0F58D7FEFA5B4E43939

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

660.55

1) **SUBTOTALS** This Period This Page (optional).....

1587.03

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Big Ten Rentals, Inc.

Nature of Debt (Purpose):
Bases

Mailing Address 1820 Boyrum St

City State ZIP Code
Iowa City IA 52240-4555

Outstanding Balance Beginning This Period

34.82

Transaction ID: D9CE80039AE0F470B870

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

34.82

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Waste Management

Nature of Debt (Purpose):
Utilities

Mailing Address PO Box 756

City State ZIP Code
Des Moines IA 50303

Outstanding Balance Beginning This Period

266.02

Transaction ID: D13EE948ED74B4BE0B66

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

266.02

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Storefront Political Media

Nature of Debt (Purpose):
Photographer

Mailing Address 250 Sutter Street, Suite 650

City State ZIP Code
San Francisco CA 94108

Outstanding Balance Beginning This Period

537.08

Transaction ID: DDB39DC1EDB03445B8B5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

537.08

1) **SUBTOTALS** This Period This Page (optional).....

837.92

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
MediacomNature of Debt (Purpose):
Cable

Mailing Address P.O. Box 5744

City State ZIP Code
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

19.14

Transaction ID: DBAEE80A9C8F14CBF964

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19.14

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MediacomNature of Debt (Purpose):
Cable

Mailing Address P.O. Box 5744

City State ZIP Code
Carol Stream IL 60197-5744

Outstanding Balance Beginning This Period

92.37

Transaction ID: D34D4235A01F441BAA58

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

92.37

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Heartland Flagpoles and FlagsNature of Debt (Purpose):
Flags

Mailing Address 3719 SW 9th Street

City State ZIP Code
Des Moines IA 50315

Outstanding Balance Beginning This Period

436.60

Transaction ID: D42D026888D4F47D198F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

436.60

1) SUBTOTALS This Period This Page (optional).....

548.11

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Grand ColonyNature of Debt (Purpose):
Lodging

Mailing Address 2824 Grand Avenue, #218

City State ZIP Code
Des Moines IA 50312

Outstanding Balance Beginning This Period

153.50

Transaction ID: D232577C9B94046BB9A9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

153.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

10000.00

Transaction ID: D76E8E67033CC4385B66

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&TNature of Debt (Purpose):
Telephone

Mailing Address P.O. Box 8110

City State ZIP Code
Aurora IL 60572

Outstanding Balance Beginning This Period

312.07

Transaction ID: DD365AF099EC8458EBE5

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

312.07

1) SUBTOTALS This Period This Page (optional).....

10465.57

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins Coie

Nature of Debt (Purpose):
Legal Consulting Services

Mailing Address Centralized Accounting Dept.
1201 Third Ave., 40th Floor

City State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

12218.23

Transaction ID: D009B107509464ACF93C

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12218.23

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins Coie

Nature of Debt (Purpose):
Legal Consulting Services

Mailing Address Centralized Accounting Dept.
1201 Third Ave., 40th Floor

City State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

12151.74

Transaction ID: D7001504DB52642CE816

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12151.74

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins Coie

Nature of Debt (Purpose):
Legal Consulting Services

Mailing Address Centralized Accounting Dept.
1201 Third Ave., 40th Floor

City State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

12046.59

Transaction ID: DEE6A4D77FA7A412F956

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12046.59

1) **SUBTOTALS** This Period This Page (optional).....

36416.56

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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PAGE 38 / 38

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12NAME OF COMMITTEE (In Full)
Chris Dodd For President Inc**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal Consulting ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

11927.67

Transaction ID: D4AB38D1C46384341B16

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11927.67

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal Consulting ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

11823.58

Transaction ID: DF7FE46652AE4441E811

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11823.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Perkins CoieNature of Debt (Purpose):
Legal Consulting ServicesMailing Address Centralized Accounting Dept.
1201 Third Ave., 40th FloorCity State ZIP Code
Seattle WA 98101-3099

Outstanding Balance Beginning This Period

1946.79

Transaction ID: DEA5024F12CD748EFB9B

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1946.79

1) **SUBTOTALS** This Period This Page (optional).....

25698.04

2) **TOTALS** This Period (last page this line number only).....

98452.95

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

98452.95